## PART B - FEE(S) TRANSMITTAL

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g armana,	E ADDRESS (Note: Use Block I for 590 09/28/2005	any change of address)	26	Fee(s) Transmittal Th	mailing can only be used fair certificate cannot be used al paper, such as an assignme of mailing or transmission.	for any other accompany	
DORITY & MAN POST OFFICE BO GREENVILLE, SO 01/04/2006 SHASSEN2 00	X 1449 C 29602-1449	JAN 0	3 2006 L	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO (571) 273-2885, on the date indicated below.			
01 FC:1501 1400.00 OP			Æ)	Katrin	a Morris	(Depositor's na	
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				De <i>c</i> 'embe	r 27, 2005	(D	
APPLICATION NO.	FILING DATE	I	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/826,371	04/04/2001		Jason P. McDevitt		KCX-250 (15306)	2875	
TITLE OF INVENTION: D	ISPOSABLE FINGER SLE	EVE FOR APPENI	DAGES				
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	МО	\$1400		\$300	\$1700 12/28/2005		
EXAMINER		ART UNI	IT	CLASS-SUBCLASS	]		
HAMILTON, LALITA M 36				602-041000			
1. Change of correspondence CFR 1,363).		,	(1) the names o	n the patent front page, li f up to 3 registered pater	·Doritz	& Manning, P.A.	
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,  (2) the name of a single firm (having as a member a 2				
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT (prin	t or type)			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Kimberly-Clark Worldwide, Inc. Neenah, Wisconsin							
Please check the appropriate	assignee category or catego	ries (will not be pri	nted on the patent)	: Individual XX C	orporation or other private gr	oup entity Governm	
4a. The following fee(s) are	enclosed:		. Payment of Fee(s)		,		
☐ A check in the amount of the fee(s) is enclosed.							
Publication Fee (No small entity discount permitted)  Payment by credit card. Form PTO-2038 is attached.							
	Copies		The Director i Deposit Account N	s hereby authorized by columber <u>04-1403</u>	harge the required fee(s), or (enclose an extra c	credit any overpayment copy of this form).	
• •	MALL ENTITY status. See	37 CFR 1.27.	• • •		LL ENTITY status. See 37 C	(O) ( )	
The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issu ublication Fee (if required) words of the United States Pate	te Fee and Publicate vill not be accepted on and Trademark	ion Fee (if any) or a from anyone other Office.	to re-apply any previously than the applicant; a reg	y paid issue fee to the application is tered attorney or agent; or t	ation identified above. he assignee or other part	
Authorized Signature	Dlann			DateD	ecember 27, 2005		
Typed or printed name	Alan R. Marshal	.1		Registration	No. <u>56,405</u>		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proc an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to comp this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.

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## ATTORNEY DOCKET NO.: KCX-250 (15306) IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Applica	ation of: McDevitt et al.	Examiner: Hamilton, Lalita M		
Serial No:	09/826,371	Art Unit:	3624	
Filed:	April 4, 2001	Deposit Acct. No:	04-1403	
Confirmation	n No: 2875 )	Client ID:	22827	
Tial . Di	)			

PATENT

Title: Disposable Finger Sleeve for Appendages

## SUBMISSION OF ISSUE AND PUBLICATION FEES

Commissioner for Patents Alexandria, VA 22313-1450

Sir:

Respectfully submitted for filing in the above-identified patent application is:

- (1) The Issue Fee and Publication Fees Transmittal; and
- (2) Credit Card Payment Form authorizing the payment of \$1700.00.

Please charge any additional fees required by this submission to Deposit Account No. 04-1403.

BY:

Respectfully submitted,

DORITY & MANNING, P.A.

December 27, 2005 Dated:

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I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents, MAIL STOP ISSUE FEE, P. O. Box 1450, Alexandria, VA 22313-1450, on December 27, 2005

Katrina Morris